## L10000126255

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C. CARROTHERS

FaegreBD.com

## FAEGRE BAKER DANIELS

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Laurie J. Crowell
Paralegal
+1 612 766 8664
laurie.crowell@FaegreBD.com

Faegre Baker Daniels LLP
2200 Wells Fargo Center → 90 South Seventh Street
Minneapolis → Minnesota 55402-3901
Phone +1 612 766 7000

Fax +1 612 766 1600

April 15, 2014

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re:

JRN Winter Park, LLC; JRN MN, LLC; JRN Punta Gorda, LLC

Statements of Change of Registered Office and Agent

Dear Sir/Madam:

Enclosed for filing are three Statements of Change of Registered Office or Registered Agent for the above referenced LLCs. Also enclosed is a check payable to the Division of Corporation in the amount of \$75,00 (\$25.00 for each LLC).

Please return filing evidence to me in the enclosed envelope. If you have any questions, please feel free to contact me at 612-766-8664.

Sincerely,

Laurie J. Crowell

Paralegal

crolj Enclosures

cc:

John R. Nagel (w/o encl.)

Samantha Heaton

US 54017060.01

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: JRN Winter Park, LLC  Name of Limited Liability	v Company
Dear Sir or Madam:	y Company
The enclosed Registered Agent/Registered Office Change a	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
Laurie Crowell	_
Name of Person	
Faegre Baker Daniels LLP	_
Firm/Company	
90 S. 7th Street #2200	
Address	-
Minneapolis, MN 55402	
City/State and Zip Code	
rvn6641@gmail.com  E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Laurie Crowell at (612	) 766-8664 trea Code & Daytime Telephone Number
Registration Section Regi Division of Corporations Divi	ILING ADDRESS: stration Section sion of Corporations Box 6327

Enclosed is a check for the following amount:

2661 Executive Center Circle

Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee

Tallahassee, Florida 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

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I. Na	me of the limited liability company:	JRN Winter Park, LLC	SECRETTERNOS	
2 (a)	Principal office address of limited l	liability company	TALLAHASSEE, FL	AGRO.
2. (u)	(Note: MUST BE STREET ADD		Punta Gorda, FL 33950	
(b)	Mailing address of limited liability	company:	384 Monaco Drive	
	(Note: MAY BE POST OFFICE	BOX)	Punta Gorda, FL 33950	
12/09/20		<u></u>	L10000126255	
3. Da	te of filing/registration in Florida		4. Document number	•
5. (a)	Registered Agent and Registered (	Office shown on t	he records of the Florida Dept.	of State:
	Registered Agent:		Jeanette M. Lombardi, PA	
	Registered Office Address:		3033 Riviera Drive, Suite 202	
	registered Street reduces.		Naples, FL 34103	
				<del></del>
(b)	Enter name of <u>NEW Registered A</u>	gent and/or NEV	V Registered Office address:	
	NEW Registered Agent:		John R. Nagel	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		384 Monaco Drive		
		Punta Gorda,	FL 33950	
Signature  John R. I  Printed  I here compliand Ti Chapta	limited liability company is not orgamed that after the change or changes e business office of the registered agt company, it is hereby confirmed thembers of the limited liability comparerating agreement of the limited liability comparerating agreement of the limited liability comparerating agreement of the limited liability of a member or authorized representative of a continuous continuous as registed with line provisions of all statutes of a member of the appointment as registed with line provisions of all statutes of a member of the appointment as registed and familiar with and accept the obligation of the limited of the lim	s are made, the Flacent will be identional the change(s) any or as otherwisellity company.  member  ered agent and a getative to the progrations of my pobling filed to mentional to the progration of the program of th	orida street address of the regis ical. Or, in the case of a Florida was/were authorized by an affi se provided in the articles of org	stered office a limited rmative vote of ganization or
	-	ons, P.O. Box 63: FILING FEE: \$2	27, Tallahassee, FL 32314 25.00	
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